

Housing Triage

What is your household? **Single adult, family, or youth Families**

Items to copy from Intake Form

- Eligible for Senior housing (at least 62 years old) Yes No
- Amount of Time Homeless _____
- Income Source _____
- Income Amount _____
- Veteran Yes No

Questions

1. How many children will be living in your household? What are their ages?
2. How many adults will be living in your household? What are their ages?
3. There might be specific housing programs that you are eligible for if you have any of the following **disabilities**:
 - Mental Illness
 - Chemical Dependency
 - Brain Injury
 - Physical Disability
 - Developmental Disability
 - HIV/AIDS

Do you have documentation? Are you working with anyone on that disability?

4. There is specific housing assistance available to people with **criminal backgrounds**. It is important to know this information so that we can determine what types of programs you are and are not eligible for.
Do you have a criminal background?
 - What?
 - When?
5. Certain housing programs allow no **drinking or drug use**. Would this be a good fit for you?
6. Have you ever broken a lease or been **evicted**?
-Was it court-ordered or landlord enforced?
7. What are your accessibility requirements?
8. Are you currently working with anyone to help you **find housing**?